Complete Summary

TITLE

Health plan members' experiences: percentage of parents or guardians of health plan members who reported how often their child's doctors communicated well.

SOURCE(S)

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. various p.

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 3, Specifications for Survey Measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. 98 p.

Measure Domain

PRIMARY MEASURE DOMAIN

Patient Experience

The validity of measures depends on how they are built. By examining the key building blocks of a measure, you can assess its validity for your purpose. For more information, visit the <u>Measure Validity</u> page.

SECONDARY MEASURE DOMAIN

Does not apply to this measure

Brief Abstract

DESCRIPTION

The CAHPS Health Plan Survey 4.0H, Child Version provides information on parents' or guardians' experiences with their child's health plan. Results summarize member experiences through ratings, composites and individual question summary rates.

Five composite scores summarize responses in key areas.

- 1. Customer Service
- 2. Getting Care Quickly

- 3. Getting Needed Care
- 4. How Well Doctors Communicate
- 5. Shared Decision Making

For this "How Well Doctors Communicate" measure, parents or guardians indicate how often ("Never," "Sometimes," "Usually," or "Always") their children's doctors communicated well with them. The "How Well Doctors Communicate" composite measure is based on four questions in the CAHPS 4.0H Child Questionnaire.

RATIONALE

NCQA's Committee on Performance Measurement has long felt that consumer experience with health care is a critical component of quality of care and is itself an outcome of care.

PRIMARY CLINICAL COMPONENT

Health care; members' experiences; physician communication

DENOMINATOR DESCRIPTION

Health plan members 17 years and younger whose parent or guardian answered the "How Well Doctors Communicate" questions on the CAHPS 4.0H Child Questionnaire (see the "Description of Case Finding" and "Denominator Inclusions/Exclusions" fields in the Complete Summary)

NUMERATOR DESCRIPTION

The number of "Never," "Sometimes," "Usually," and "Always" responses on the "How Well Doctors Communicate" questions (see the related "Numerator Inclusions/Exclusions" field in the Complete Summary)

Evidence Supporting the Measure

EVIDENCE SUPPORTING THE CRITERION OF QUALITY

- A formal consensus procedure involving experts in relevant clinical, methodological, and organizational sciences
- One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Evidence Supporting Need for the Measure

NEED FOR THE MEASURE

Unspecified

State of Use of the Measure

STATE OF USE

Current routine use

CURRENT USE

Accreditation
Decision-making by businesses about health-plan purchasing
Decision-making by consumers about health plan/provider choice
External oversight/Medicaid
External oversight/State government program
Internal quality improvement

Application of Measure in its Current Use

CARE SETTING

Managed Care Plans

PROFESSIONALS RESPONSIBLE FOR HEALTH CARE

Physicians

LOWEST LEVEL OF HEALTH CARE DELIVERY ADDRESSED

Single Health Care Delivery Organizations

TARGET POPULATION AGE

Age less than or equal to 17 years

TARGET POPULATION GENDER

Either male or female

STRATIFICATION BY VULNERABLE POPULATIONS

Unspecified

Characteristics of the Primary Clinical Component

INCIDENCE/PREVALENCE

Unspecified

ASSOCIATION WITH VULNERABLE POPULATIONS

Unspecified

BURDEN OF ILLNESS

Unspecified

UTILIZATION

Unspecified

COSTS

Unspecified

Institute of Medicine National Healthcare Quality Report Categories

IOM CARE NEED

End of Life Care Getting Better Living with Illness Staying Healthy

IOM DOMAIN

Patient-centeredness

Data Collection for the Measure

CASE FINDING

Both users and nonusers of care

DESCRIPTION OF CASE FINDING

Health plan members 17 years and younger as of December 31st of the measurement year, who have been continuously enrolled in the health plan during the measurement year (commercial) or the last 6 months of the measurement year (Medicaid), with no more than one gap in enrollment of up to 45 days (commercial) or up to 1 month (Medicaid) during the measurement year and who were enrolled at the time the survey was completed

DENOMINATOR SAMPLING FRAME

Enrollees or beneficiaries

DENOMINATOR INCLUSIONS/EXCLUSIONS

Inclusions

Health plan members 17 years and younger whose parent or guardian answered the "How Well Doctors Communicate" questions on the CAHPS 4.0H Child Questionnaire. Include nonresponses*.

*Nonresponses:

- Refusal
- After maximum attempts
- Bad addresses
- Bad addresses and nonworking/unlisted phone number or member is unknown at the dialed phone number

Exclusions

- Deceased
- Does not meet eligible population criteria (see "Description of Case Finding" field)
- Language barrier

RELATIONSHIP OF DENOMINATOR TO NUMERATOR

All cases in the denominator are equally eligible to appear in the numerator

DENOMINATOR (INDEX) EVENT

Patient Characteristic

DENOMINATOR TIME WINDOW

Time window precedes index event

NUMERATOR INCLUSIONS/EXCLUSIONS

Inclusions

The number of "Never," "Sometimes," "Usually," and "Always" responses on the "How Well Doctors Communicate" questions

From the responses, a composite mean and variance score are calculated. A higher composite mean is associated with better quality. Additionally, composite global proportions and variances are calculated as well as item-specific question summary rates for each composite question.

Note: A questionnaire must have the final disposition code of *Complete and Valid* survey for inclusion in the survey results calculations.

Refer to the original measure documentation for details.

Exclusions

Unspecified

MEASURE RESULTS UNDER CONTROL OF HEALTH CARE PROFESSIONALS, ORGANIZATIONS AND/OR POLICYMAKERS

The measure results are somewhat or substantially under the control of the health care professionals, organizations and/or policymakers to whom the measure applies.

NUMERATOR TIME WINDOW

Fixed time period

DATA SOURCE

Administrative data Patient survey

LEVEL OF DETERMINATION OF QUALITY

Not Individual Case

PRE-EXISTING INSTRUMENT USED

Unspecified

Computation of the Measure

SCORING

Non-weighted Score/Composite/Scale

INTERPRETATION OF SCORE

Better quality is associated with a higher score

ALLOWANCE FOR PATIENT FACTORS

Analysis by subgroup (stratification on patient factors, geographic factors, etc.)

DESCRIPTION OF ALLOWANCE FOR PATIENT FACTORS

This measure requires that results are reported separately for the commercial and Medicaid product lines.

STANDARD OF COMPARISON

External comparison at a point in time External comparison of time trends Internal time comparison

Evaluation of Measure Properties

EXTENT OF MEASURE TESTING

Unspecified

Identifying Information

ORIGINAL TITLE

How well doctors communicate.

MEASURE COLLECTION

HEDIS® 2009: Healthcare Effectiveness Data and Information Set

MEASURE SET NAME

Satisfaction with the Experience of Care

MEASURE SUBSET NAME

CAHPS Health Plan Survey 4.0H, Child Version

DEVELOPER

National Committee for Quality Assurance

FUNDING SOURCE(S)

Unspecified

COMPOSITION OF THE GROUP THAT DEVELOPED THE MEASURE

National Committee for Quality Assurance's (NCQA's) Measurement Advisory Panels (MAPs) are composed of clinical and research experts with an understanding of quality performance measurement in the particular clinical content areas.

FINANCIAL DISCLOSURES/OTHER POTENTIAL CONFLICTS OF INTEREST

In order to fulfill National Committee for Quality Assurance's (NCQA's) mission and vision of improving health care quality through measurement, transparency and accountability, all participants in NCQA's expert panels are required to disclose potential conflicts of interest prior to their participation. The goal of this Conflict Policy is to ensure that decisions which impact development of NCQA's products and services are made as objectively as possible, without improper bias or influence.

ADAPTATION

Measure was adapted from another source.

PARENT MEASURE

CAHPS 4.0 Health Plan Survey (Child Questionnaire)

RELEASE DATE

1997 Jan

REVISION DATE

2008 Jul

MEASURE STATUS

This is the current release of the measure.

This measure updates a previous version: National Committee for Quality Assurance (NCQA). HEDIS 2008: Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications. Washington (DC): National Committee for Quality Assurance (NCQA); 2007 Jul. various p.

SOURCE(S)

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. various p.

National Committee for Quality Assurance (NCQA). HEDIS® 2009: Healthcare Effectiveness Data & Information Set. Vol. 3, Specifications for Survey Measures. Washington (DC): National Committee for Quality Assurance (NCQA); 2008 Jul. 98 p.

MEASURE AVAILABILITY

The individual measure, "How Well Doctors Communicate," is published in "HEDIS® 2009. Healthcare Effectiveness Data & Information Set. Vol. 2, Technical Specifications."

For more information, contact the National Committee for Quality Assurance (NCQA) at 1100 13th Street, NW, Suite 1000, Washington, DC 20005; Telephone: 202-955-3500; Fax: 202-955-3599; Web site: www.ncqa.org.

NQMC STATUS

This NQMC summary was completed by ECRI on March 27, 2007. The information was not verified by the measure developer. This NQMC summary was updated by

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